2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 14, 2006
Secretary of State

DOCUMENT# L05000095578

Entity Name: DQ INTERNATIONAL PROPERTIES, LLC

Current Principal Place of Business:

509 LES JARDIN DRIVE
PALM BEACH GARDENS, FL 33458

New Principal Place of Business:

Current Mailing Address:

509 LES JARDIN DRIVE
PALM BEACH GARDENS, FL 33458

New Mailing Address:

P.O. BOX 185
JUPITER, FL 33468

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

QUARRIE, LISA G ESQUIRE
509 LES JARDIN DRIVE
PALM BEACH GARDENS, FLORIDA, FL 33458 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: QUARRIE, LISA G ESQUIRE
Address: 509 LES JARDIN DRIVE
City-St-Zip: PALM BEACH GARDENS, FL 33458

Title: MGRM ( ) Delete
Name: QUARRIE, OLIVE F
Address: 509 LES JARDIN DRIVE
City-St-Zip: PALM BEACH GARDENS, FL 33458

Title: MGRM (X) Delete
Name: QUARRIE, FRANKLIN C
Address: 509 LES JARDIN DRIVE
City-St-Zip: PALM BEACH GARDENS, FL 33458

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: QUARRIE, LISA G ESQUIRE
Address: 509 LES JARDIN DRIVE
City-St-Zip: PALM BEACH GARDENS, FL 33458

Title: MGRM (X) Change ( ) Addition
Name: DUNCAN, ROGER L
Address: 509 LES JARDIN DRIVE
City-St-Zip: PALM BEACH GARDENS, FL 33458

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: LISA G. QUARRIE MGRM 02/14/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date